

FAX TRANSMISSION

FAX RECEIVED

MAY U 1 2003

7100 N.W. 62nd Avenue P.O. Box 1000 Johnston, lowa 50131-1000

GROUP 1600

Phone: (515) 334-4467 Fax: (515) 334-6883

TO:

EXAMINER CYNTHIA COLLINS

FROM:

MARIANNE MICHEL

RE:

U.S. PATENT APPLICATION SERIAL NO. 09/511,445

ATTORNEY DOCKET NO. 1115A

DATE:

04/30/03

FAX NUMBER: (703) 872-9307

NUMBER OF PAGES FOLLOWING THIS SHEET: 9

TRANSMISSION INCLUDES THE FOLLOWING:

Certificate of Transmission (1 Page)
Fee Transmittal for FY 2003 (1 Page)
Petition for Extension of Time (1 Page)
Amendment (6 Pages)

The contents of this facsimile are or may be attorney privileged and/or confidential and are intended only for the use of the recipient identified above. If the reader of this message is not the identified recipient, or the employee or agent responsible for delivering it to the identified recipient, you are hereby notified that any dissemination or use of this communication is unlawful and strictly prohibited. If you have received this communication in error, please immediately notify the sender by telephone and return the original message to the sender at the above address via the U.S. Postal Service. Anyone so cooperating will be reimbursed for the reasonable expense incurred.

If there is a problem with transmission or illegible pages, please contact the sender or (515) 334-6845.



PTO/SB/97 (08-00)

Approved for use through 10/31/2002. OMB 0051-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Papenwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office

on <u>April 30, 2003</u>. Date

> Marianne V Muhel Signature

Marianne H. Michel
Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

- 1) Fee Transmittal for FY 2003/1 Page
- 2) Petition for Extension of Time/1 Page
- 3) Amendment/6 Pages

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Complete if Known

PTO/SB/17 (01-03)
Approved for use through 04/30/2003. CMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL						Outplace // the same							
F	EE) F	(AN	SMIII	AL	Application Number			09/511,445				
	·FY	2003		Filing	Filing Date		02/22/2000						
						First N	lamed In	ventor	Wittiau	J. Gordon-Kamm			
Effecth	ve 01/01/	2003. P	oleni ites a	re subject to ann	ual rovision.	Exami	ner Nam	e	Collin	s, Cynthia E.			
Applicant claims small entity status. See 37 CFR 1.27							Group / Art Unit 1538						
TOTAL AMOUNT OF PAYMENT (\$) 110							Attorney Docket No. 1115A						
	MPTHC	D OF P	AYMENT IC	heck all that ap	oly)	Г			FEE CA	ALCULATION (continued)			
		0				3. ADI	IAMOITIC	. FEES					
☐ Check	☐ Cred	it card	☐ Money Order	y 🗖 Other 🗆] None	Large	Entity	Small E	intity				
Deposit A	Account		Order		<u> </u>	Fee Code	Fee (\$)	Fee Code	For (\$)	Fee Doscription	Pee Paid		
Deposit						1051	130	2051	65	Surcharge - late filing fee or oath			
Account Number	Ľ	5-1852				1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.			
Deposit						1053	130	1053	130	Non-English specification			
Account		ioneur H	i-Bred Intern	ational, Inc.	ļ	1812	2,520	1812	2,520	For filing a request for reexemination			
Name				Vahaak all that as		1604	920*	1804	920*	Requesting publication of SIR prior to Examiner action			
☑ Charge fo	e(s) indi	cated be	elow 🗵 C	<i>check all that ap</i> tredit any overpo the pendency of	yments	1805	1,840^	1805	1,840"	Requesting publication of SIR after Examiner action			
☐ Charge fe	e(s) indi	cated be	elow, exce	pt for the filing	fee	1251	110	2251	55	Extension for reply within first month	110		
to the above	-identifie			ATION	***	1252	410	22.52	205	Extension for reply within second month			
4 DAG	C EU ISY					1253	930	2253	465	Extension for reply within third month			
Large Entity	Sm	ali Entit	_			1254	1,450	2254	725	Extension for reply within fourth month			
				oscriptl <u>og</u>	Fee Paid	1255	1,970	2255	985	Extension for reply within fifth month			
		- 1-7		filino (ee	<u> </u>	1401	320	2401	160	Notice of Appeal			
				-		1402	320	2402	160	Filing a brief in support of an appoal	\vdash		
	. '	•	_	•		1403	280	2403	140	Request for oral hearing			
1004 750	200	37	5 Relasi	ue tiling fec		1451	1,510	1451	1,510	Petition to institute a public use proceeding			
1005 160	200	90	Provis	Haust Jilling tee		1452	110	2452	56	Petition to revive — unavoidable			
	BASIC FILING FEE Small Entity Small Entity					1453	1,300	2453	650	Petition to revive - unintentional			
						1501	1,300	2501	650	Utility issue fee (or reissue)	I I		

2. EXTRA CLAIM FEES								1502	470	2502	235	Design issue fee		
ı					Extra	Fee from		Fcc	1503	630	2503	315	Plant issue fee	
ı	Total Claims	10	-13 **	_ r	Claims O X	below 18	٦ =	Paid	1460	130	1460	130	Petitions to the Commissioner	
ł		<u> </u>	=- - -		<u> </u>		ᅻ _	<u></u>	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
	Independent Claims	2	-2	=	0 ×	84	.,	0	1806	180	1806	190	Submission of Information Disclasure Strat	
	Multiple Dependent La <u>rge Entity</u>	, ,	Small E	niltv	×	.] =	0	8021	10	9 021	40	Recording each patent assignment per property (times number of properties)	
ļ	Fée	Fee (\$)	Fee Code	Fee (\$)	Fee Dos	cription			1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1	1202	18	2202	9		Claims in excess of 20				7 5 0	2610	375	For each additional invention to be examined (37 CFR § 1,129(b))	
ı		84	2201	42		Independent claims in excess of 3 Multiple dependent claim, if not paid			1		1			
ı	1203	280	2203	140		•		•	1801	750	2801	375	Request for Continued Examination (RCE)	
	1204	84	2204	42		** Reissue independent claims over original patent				900	1902	900	Request for expedited exemination of a design application	
-	1205	18	2205	9		ue claims in : jinal patent	exce	ss of 20 and					or a comparable approximate	<u></u>
<u> </u>									Other fee (specify)					I

SUBMITTED BY		<u>μμ</u>		Cor	mplete (if applicable)
Namo (Print/Type)	Martanne H. Michel	Registration No. Attorney/Agont)	35,288	Telephono	(515) 334-4467
Signature	Marian	OHMINGO		Date	April 30, 2003

"Reduced by Basic Filing Fee Pald

SUBTOTAL (3)

(\$) 110

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038, included on this form. Provide credit card information and authorization on PTO-2038, on application. Confidentially is governed by 37 CFR 1.17 and 1.27. The information is required to obtain or relatin a bonefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 39 U.S.C. 122 and 37 CPR 1.14. This collection is estimated to take 12 minutes to complete, including gethering, proporting, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademerk Office, U.S. Department of Commerce, Washington, DC 20231. JO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing this form, cell 1-800-PTO-3199 (1-800-706-9199) and select option 2.

SUBTOTAL (2)

**or number previously paid, if greater; For Reissues, see above